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FROM: Michael Malinzak *μ*

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COMMENTS:

Attached please find a Transmittal Form and Preliminary Amendment For Examiner's Review.

Application No.: 10/765,820  
Filing Date: January 27, 2004  
Applicant: Vijay BAHTEL, et al.  
Group Art Unit: 2123  
Examiner: Unknown  
Title: COOLING SYSTEM DESIGN SIMULATOR  
Attorney Docket: 0315-000555  
Confirmation No: 8979

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/765,820
	Filing Date	January 27, 2004
	First Named Inventor	Vijay BAHEL, et al.
	Art Unit	2123
	Examiner Name	---
Total Number of Pages In This Submission	Attorney Docket Number 0315-000555	

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Preliminary Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Harnes, Dickey & Pierce, P.L.C.	Attorney Name Michael Malinzak Michael P. Doerr	Reg. No. 43,770 52,825
Signature			
Date	May 3, 2006		

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Michael Malinzak	Express Mail Label No.	
Signature		Date	May 3, 2006

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**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

**PRELIMINARY AMENDMENT**

Sir:

Prior to examination of the present application, please consider the following.

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 11 of this paper.